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PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/659,405	
	Filing Date	09/10/2003	
	First Named Inventor	Catherine Solich	
	Art Unit	3722	
	Examiner Name	M.S. Carfer	
Total Number of Pages in This Submission	9	Attorney Docket Number	

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
<b>Remarks</b>  response to a Non-Compliant Office Action		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Catherine Solich		
Signature	X Catherine Solich		
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Date	X 11-6-04	Reg. No.	

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## Response to a non-compliant Office Action

Application Ser. No. 10/659,405

This communication is a response to a non-compliant Office Action having a mailing date of 10/28/2004 and setting forth a period for response of one month which would expire on 11/28/2004.

The paragraphs have been corrected to include markings;

The replacement drawings have now been identified in the top margin;

The text of the canceled claim has been taken out.

x Catherine Solich

Catherine Solich

Date: x 11/6/04